

former was, at the time, not a member of the Association at all—a fact which, if correct, may perhaps render the whole proceedings null and void, and would supply a fitting and most conclusive proof of the farcical mismanagement which has characterised the whole affair. Sir Dyce Duckworth, we observe, states that the vote upon this Resolution “was not and could not be challenged”—an assertion which is the more extraordinary, because he was present, and must have heard the distinct manner in which the vote *was* challenged.

There is one other matter to which we must refer. Sir Dyce Duckworth concludes his letter by an extraordinary attack upon “the Matrons’ Council, a body uncertified and undirected by medical men, and whose views, therefore, demand very searching criticism by the latter, before they are submitted for general adoption.” The only intelligible meaning—if this remarkable tirade has any meaning—would appear to be that the Matrons’ Council—a body composed of a large number of the Matrons of the leading Hospitals in the United Kingdom—has omitted to obtain Sir Dyce Duckworth’s sanction and approval to its existence, or its programme. If such be the melancholy fact, it is clearly incumbent upon all, who can maintain a due gravity of demeanour, to condole with Sir Dyce Duckworth.

Englishwomen, at the end of the nineteenth century, possess perfect liberty to join, or form, what societies they please for the promotion of any lawful object. And, in our humble judgment, persons who, with forcible feebleness, assume a dictatorial position to which they are not entitled, and presume to publicly withhold their approval from such societies—when their approval is neither sought for, nor necessary—merely render themselves superlatively ridiculous.

Lectures on Elementary Physiology in relation to Medical Nursing.

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LECTURE III.—DIGESTION AND INDIGESTION.

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THE walls of the intestinal canal consist of three coats, the inner layer being mucous membrane, continuous, as we have already seen, with the lining membrane of the stomach, the œsophagus, the mouth, and therefore with the outer integument or

skin. Outside this, are two layers of varying thickness of muscular tissue, and finally an outer layer of serous membrane derived from the PERITONEUM—or membrane which lines the abdominal cavity. All the layers are held together by the connective tissue, which has been already described; and opening out upon the surface of the mucous membrane are the mouths of glands which secrete special fluids, just as we have seen that the glands of the stomach secrete the gastric juice, and as those of the mouth secrete the saliva. The muscular tissue of the walls of the intestine is disposed in two distinct layers, one layer passing round the canal, that is to say, transversely, and the other layer of muscle extending along its length, or longitudinally. The object of this arrangement is to bring about the propulsion of the food along the intestinal canal, each portion being squeezed onward, so to speak, by the contraction of the successive layers of muscle. This muscular contraction extending gradually down the whole of the alimentary canal is the cause of what has been described as “the peristaltic action” of the intestines. Sometimes, from various causes, there is an impediment to the passage onwards of the food, and the condition known as “intestinal obstruction” occurs—the further progress of the food being thus prevented. It may be that part of the intestines has been squeezed through one of the small openings which exist at the lower part of the front abdominal wall, producing what is called a HERNIA; or a band of tissue may have formed across the gut, tying this down and thus constricting it. Or a twist in the course of the intestine may have been brought about by accident or disease, and once more the propulsion of the food is prevented. In all these cases, Nature attempts to repair the injury so far as possible, and to remove from the intestines materials which are not requisite to the body and which may even prove poisonous if not removed from the system. And to effect this end, the ordinary peristaltic action becomes reversed, and the food, instead of being propelled from above downwards, is forced back again, from below upwards. So the digested food becomes pressed back through the intestines into the stomach, and then is expelled from the mouth by the ordinary process of vomiting. It is important that this fact should be remembered; and that, whenever the peristaltic action is reversed, it reveals a condition of more or less danger.

(To be continued.)

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